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	PATENT A	PPLICATION Effecti	N FEE DE			N RECO	RD		plication	or Do	cket Numl	oer É
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL EN		OR	OTHER SMALL E		
TO	TAL CLAIMS							RATE	FEE	ſ	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS			7 minus 20=		•			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		•			X40=	· · · · · ·	OR	X80=	
MUL	TIPLE DEPEN	DENT CLAIM PF	ESENT					+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	7/7
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3))	SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=		IOR	X80=	
۷	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDEN	T CLAIM]	105	-		+270=	
								+135=		OR	TOTAL	
							ADDIT. FEE		OR	ADDIT. FEE		
		(Column 1) CLAIMS			ımn 2) HEST	(Column 3	4		4551	1		1 4001
MENT B		REMAINING AFTER AMENDMENT		NUI PREV	MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MQ	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AMENDA	Independent	*	Minus	***				X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	IT CLAIM		_	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3	3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER YOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
OME	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
MEN	Independent	•	Minus	***	- ()	=		X40=		OR	X80=	
14	FIRST PRESI	ENTATION OF M	ULTIPLE DE	PENDE	NT CLAIM				}	┨ॅ¨`		+

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 8/00)

TOTAL ADDIT. FEE

+135=